



## REMODEL TO SINGLE FAMILY DWELLING WORKSHEET

Application No. \_\_\_\_\_

Please complete the section below clearly, legibly and in ink. Attach a plot plan with sign elevations

PROJECT ADDRESS, CITY AND ZIP
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DESCRIPTION OF WORK

<b>Cost of Construction:</b> (Includes all materials and labor costs. This may be revised by the Building Official.) \$	<b>Revised Valuation:</b> \$	<input type="checkbox"/> <b>CHECK THIS BOX IF WORK HAS ALREADY STARTED . Double the permit fee will be charged for legalization.</b>
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<b>Type</b> <input type="checkbox"/> Kitchen <input type="checkbox"/> Bathroom (s) # _____ <input type="checkbox"/> Stucco / Re-stucco <input type="checkbox"/> Replace Windows <input type="checkbox"/> Non-Block Fence	<b>Plumbing</b> <input type="checkbox"/> Re-pipe <input type="checkbox"/> Sewer Cap <input type="checkbox"/> Water Heater <input type="checkbox"/> Water Softener <input type="checkbox"/> Lawn Sprinklers <input type="checkbox"/> Sewer Facility Fee \$ _____	<b>Mechanical</b> <input type="checkbox"/> Bathroom Vent Fan  <b>Note: New FAU requires a separate application.</b>	<b>Electrical</b> <input type="checkbox"/> Landscape Lighting <input type="checkbox"/> Branch Circuits # _____  <b>Note: New electrical service requires a separate application.</b>
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APN	TRACK NO.	LOT	HIGH FIRE HAZARD ZONE	<input type="checkbox"/> YES <input type="checkbox"/> NO	ZONE USE	NICS 8141 SFD	OCC. 1 R3	OCC. 2 U	
OCC. 1 FLR. AREA	OCC. 2 FLR. AREA	DESIGN OCCUPANT LOAD	2	STORIES	BASEMENT	MEZZ.	TYPE OF CONST. V-B	GUSD FLR. AREA +0	BLDG. FLR. AREA ABOVE GRADE
BLDG. FLR. AREA BELOW GRADE		ZONING BLDG. HEIGHT	N/C		BEDROOMS	DWELLING UNITS	FIRE SPRINKLERS	<input type="checkbox"/> YES <input type="checkbox"/> NO	THE EDITION OF THE CODE

Check one for the primary contact	<input type="checkbox"/>	APPLICANT'S NAME	MAILING ADDRESS	BUS. PHONE NO.	
	<input type="checkbox"/>	PROPERTY OWNER'S NAME	MAILING ADDRESS	PHONE NO.	
		E-MAIL ADDRESS			
	<input type="checkbox"/>	LICENSED DESIGN PROFESSIONAL (ARCHITECT OR ENGINEER IN CHARGE OF THE PROJECT) INFORMATION:			LICENSE NO.
		NAME:			
		MAILING ADDRESS:	PHONE NO.	LICENSE NO.	
		E-MAIL ADDRESS			

CALIFORNIA LICENSED CONTRACTOR'S DECLARATION: I herby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

CONTRACTOR'S NAME	MAILING ADDRESS	PHONE NO.
E-MAIL ADDRESS		
LICENSE CLASS AND NUMBER	CONTRACTOR SIGNATURE	

STAFF COMMENTS, (INITIALS)

<b>OK TO SUBMIT BY:</b> <small>PRINT</small> <table border="1" style="width:100%"><tr><td style="width:50%;"><input type="checkbox"/> <b>ENGINEERING</b> <small>PRINT</small></td><td style="width:50%;">SIGNATURE</td></tr><tr><td><input type="checkbox"/> <b>ZONING</b> <small>PRINT</small></td><td>SIGNATURE</td></tr><tr><td><input type="checkbox"/> <b>TRAFFIC ENGINEERING</b> <small>PRINT</small></td><td>SIGNATURE</td></tr><tr><td><input type="checkbox"/> <b>REDEVELOPMENT AGENCY</b> <small>PRINT</small></td><td>SIGNATURE</td></tr><tr><td><b>BLDG. PLAN CHECK</b> <small>PRINT</small></td><td>SIGNATURE</td></tr></table>	<input type="checkbox"/> <b>ENGINEERING</b> <small>PRINT</small>	SIGNATURE	<input type="checkbox"/> <b>ZONING</b> <small>PRINT</small>	SIGNATURE	<input type="checkbox"/> <b>TRAFFIC ENGINEERING</b> <small>PRINT</small>	SIGNATURE	<input type="checkbox"/> <b>REDEVELOPMENT AGENCY</b> <small>PRINT</small>	SIGNATURE	<b>BLDG. PLAN CHECK</b> <small>PRINT</small>	SIGNATURE	<b>ACCEPTED BY:</b> <small>PRINT</small> <table border="1" style="width:100%"><tr><td style="width:50%;">DATE</td><td style="width:50%;">RECEIPT NO.</td></tr><tr><td colspan="2"><b>P.W. EASEMENTS</b></td></tr><tr><td><input type="checkbox"/> <b>G.W.P. WATER</b> <small>PRINT</small></td><td>SIGNATURE</td></tr><tr><td><input type="checkbox"/> <b>G.W.P. ELECTRIC</b> <small>PRINT</small></td><td>SIGNATURE</td></tr><tr><td><input type="checkbox"/> <b>AGENCY</b> <small>PRINT</small></td><td>SIGNATURE</td></tr><tr><td><input type="checkbox"/> <b>AGENCY</b> <small>PRINT</small></td><td>SIGNATURE</td></tr></table>	DATE	RECEIPT NO.	<b>P.W. EASEMENTS</b>		<input type="checkbox"/> <b>G.W.P. WATER</b> <small>PRINT</small>	SIGNATURE	<input type="checkbox"/> <b>G.W.P. ELECTRIC</b> <small>PRINT</small>	SIGNATURE	<input type="checkbox"/> <b>AGENCY</b> <small>PRINT</small>	SIGNATURE	<input type="checkbox"/> <b>AGENCY</b> <small>PRINT</small>	SIGNATURE
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<small>THE CITY OF GLENDALE RESTRICTS ISSUANCE OF THE BUILDING PERMIT TO THE PROPERTY OWNER OR LICENSED GENERAL CONTRACTOR ONLY. SIGNATURES OF THIS INDIVIDUAL MUST BE VERIFIED BY PERSONAL IDENTIFICATION. ANY PERSON SIGNING THE PERMIT APPLICATION AS AGENT FOR THE OWNER OR CONTRACTOR SHALL HAVE AN ORIGINAL LETTER OF AUTHORIZATION AT THE TIME OF PERMIT ISSUANCE. APPLICATIONS SHALL EXPIRE ONE YEAR AFTER THE DATE OF SUBMITTAL AND THEREAFTER, ANY DOCUMENTS SUBMITTED TO THE DEPARTMENT SHALL BE RETURNED TO THE APPLICANT OR DESTROYED BY THE BUILDING OFFICIAL. UPON WRITTEN REQUEST FROM THE APPLICANT, THE BUILDING OFFICIAL MAY EXTEND THE PERIOD OF PERMIT APPLICATION.</small>																							
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PERMIT FEE	Y N																						

ADDRESS: \_\_\_\_\_ PERMIT NO. \_\_\_\_\_

Please Draw a Plot Plan. Locate all structues on lot

A large, empty rectangular box with a thin black border, intended for drawing a plot plan. It occupies the majority of the page below the header and instruction text.